

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF IOWA

ADDRESS (number and street)

621 E. NINTH STREET

☐ Check if different than previously reported. (ACC)

DES MOINES

IA

50309

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00014498

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)

☐ July 15  
Quarterly Report (Q2)

☐ October 15  
Quarterly Report (Q3)

☐ January 31  
Year-End Report (YE)

☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer WILLIAM R. GUSTOFF

Signature of Treasurer

WILLIAM R. GUSTOFF

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 20 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF IOWA

Report Covering the Period: From: M M / D D / Y Y Y Y Y 06 / 01 / 2014 To: M M / D D / Y Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		302443.54
(b) Cash on Hand at Beginning of Reporting Period.....	130399.15	
(c) Total Receipts (from Line 19) .....	29602.50	272390.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	160001.65	574833.95
7. Total Disbursements (from Line 31) .....	148783.15	563615.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	11218.50	11218.50
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REPUBLICAN PARTY OF IOWA

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
06 01 2014

To:

M M / D D / Y Y Y Y  
06 30 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2800.00

32903.00

(ii) Unitemized .....

6512.50

85405.05

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

9312.50

118308.05

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1250.00

8400.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

10562.50

126708.05

## 12. Transfers From Affiliated/Other

Party Committees.....

17540.00

59050.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

1500.00

86632.36

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

1500.00

86632.36

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

29602.50

272390.41

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

28102.50

185758.05

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	18032.91	49255.51
(ii) Non-Federal Share.....	65501.99	179027.34
(b) Other Federal Operating Expenditures .....	48075.11	207369.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	131610.01	435651.86
22. Transfers to Affiliated/Other Party Committees.....	17173.14	127963.59
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	148783.15	563615.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83281.16	384588.11

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10562.50	126708.05
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10562.50	126708.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	66108.02	256624.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	66108.02	256624.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

## **A. GARY CARLSON**

Mailing Address 104 DEERPATH LANE

City State Zip Code  
MUSCATINE IA 52761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HNI CORPORATION

Occupation  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2014

Transaction ID : SA11AI.14693

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. JOHN DEVRIES**

Mailing Address 2516 JORDAN GROVE

City State Zip Code  
WEST DES MOINES IA 50265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DE VRIES COMMUNICATIONS, INC.

Occupation  
OWNER - TRAVEL AGENCY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 19 / 2014

Transaction ID : SA11AI.14113

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. CODY HOEFERT**

Mailing Address 907 SOUTH GREENE STREET

City State Zip Code  
ROCK RAPIDS IA 51246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LYON COUNTY CHIROPRACTIC

Occupation  
CHIROPRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 29 / 2014

Transaction ID : SA11AI.14110

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 49

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

## **A. VERNON ROBINSON**

Mailing Address 2713 EDINBURG DR

City State Zip Code  
WINSTON SALEM NC 27103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL DRAFT BEN CARSON FOR PRESI

Occupation

CAMPAIGN DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2014

Transaction ID : SA11AI.14114

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. HARLAN VANDERGRIEND**

Mailing Address 1341 KAHLER CT

City State Zip Code  
SHELDON IA 51201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

OPTOMETRIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 29 / 2014

Transaction ID : SA11AI.14111

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. SHERILL WHISENAND**

Mailing Address 4441 URBANDALE AVENUE

City State Zip Code  
DES MOINES IA 50310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

APOLLO GROUP, INC..

Occupation

COLLEGIATE ENROLLMENT REPRESENTAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2014

Transaction ID : SA11AI.14093

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

**TOTAL** This Period (last page this line number only)..... ►

2800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 49

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

## **A. CITIZENS FOR SELF GOVERNANCE**

Mailing Address 17341 D PICKWICK CIRCLE

City State Zip Code  
 PURCELLVILLE VA 20132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : SA11C.14109**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. GRASSLEY COMMITTEE INC**

Mailing Address PO BOX 1000

City State Zip Code  
 DES MOINES IA 50304

FEC ID number of contributing  
federal political committee.

C C00230482

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : SA11C.14772**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 49

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

## **A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City  
WASHINGTON

State Zip Code  
DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

59050.00

Date of Receipt

**06** / **02** / **2014**

**Transaction ID : SA12.14115**

Amount of Each Receipt this Period

17540.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

17540.00

17540.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. APPLE STORE**

Mailing Address 101 S. 74TH STREET

City WEST DES MOINES      State IA      Zip Code 50266

Purpose of Disbursement  
CHASE CC PAYMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 02 / 2014
**Transaction ID : SB21B.14622**

Amount of Each Disbursement this Period

64.66

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City SAN FRANCISCO      State CA      Zip Code 94128

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 11 / 2014
**Transaction ID : SB21B.14623**

Amount of Each Disbursement this Period

92.22

Full Name (Last, First, Middle Initial)

**C. BANKERS TRUST CC FEDERAL**

Mailing Address PO BOX 1991

City DES MOINES      State IA      Zip Code 50305

Purpose of Disbursement  
BANKERS TRUST CC PAYMENT: BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2014
**Transaction ID : SB21B.14681**

Amount of Each Disbursement this Period

40.57

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

92.22

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF IOWA

### A. BANKERS TRUST CC FEDERAL

Date of Disbursement

Transaction ID : SB21B.14624

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Response	Percentage
Yes	3.64
No	0.36

### B. BANKERS TRUST CC FEDERAL

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.14625

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.42
25-34	~8.5
35-44	~7.5
45-54	~6.5
55-64	~5.5
65-74	~4.5
75-84	~3.5
85+	~2.5

### C. BANKERS TRUST CC FEDERAL

Date of Disbursement

Transaction ID : SB21B.14626

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

15.33

**SUBTOTAL** of Disbursements This Page (optional).....

29.39

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF IOWA

**A. BANKERS TRUST CC FEDERAL**

06 / 19 / 2014

Transaction ID : SB21B.14627

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

388.09

**B. STEVEN BEIRFELDT**

MM / DD / YYYY

Transaction ID : SB21B.14674

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1410.00

### C. CHASE CARD SERVICES

Transaction ID : SB21B.14628

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

4765.73

6563.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 03 / 2014**Transaction ID : SB21B.14629**

Amount of Each Disbursement this Period

19000.00

Full Name (Last, First, Middle Initial)

**B. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 04 / 2014**Transaction ID : SB21B.14630**

Amount of Each Disbursement this Period

424.53

Full Name (Last, First, Middle Initial)

**C. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 05 / 2014**Transaction ID : SB21B.14631**

Amount of Each Disbursement this Period

3346.18

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22770.71

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE      State IL      Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06      06      2014
**Transaction ID : SB21B.14632**

Amount of Each Disbursement this Period

187.83

Full Name (Last, First, Middle Initial)

**B. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE      State IL      Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06      09      2014
**Transaction ID : SB21B.14633**

Amount of Each Disbursement this Period

66.78

Full Name (Last, First, Middle Initial)

**C. CHASE CARD SERVICES**

Mailing Address PO BOX 93014

City PALATINE      State IL      Zip Code 60094

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06      13      2014
**Transaction ID : SB21B.14634**

Amount of Each Disbursement this Period

429.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

684.56

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF IOWA

## A. CHASE CARD SERVICES

Date of Disbursement

Transaction ID : SB21B.14635

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	1471
18-24	~1000
25-34	~800
35-44	~600
45-54	~400
55-64	~300
65-74	~200
75-84	~100
85+	~50

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B. CHASE CARD SERVICES**

Date of Disbursement

MM / DD / YYYY

Mailing Address PO BOX 93014

City	State	Zip Code
PALATINE	IL	60094

Transaction ID : SB21B.14636

Purpose of Disbursement	CREDIT CARD PAYMENT: SEE MEMO ENTRIES
-------------------------	---------------------------------------

Amount of Each Disbursement this Period

2115.23

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

**C. CHASE CARD SERVICES**

Date of Disbursement

Mailing Address PO BOX 93014

City	State	Zip Code
PALATINE	IL	60094

Transaction ID : SB21B.14637

Purpose of Disbursement	CREDIT CARD PAYMENT: SEE MEMO ENTRIES
-------------------------	---------------------------------------

Amount of Each Disbursement this Period

5166.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

8752.23

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. CULLIGAN WATER CONDITIONING**

Mailing Address PO BOX 65065

City WEST DES MOINES      State IA      Zip Code 50265-0065

Purpose of Disbursement  
BANKERS TRUST CC PAYMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014
**Transaction ID : SB21B.14682**

Amount of Each Disbursement this Period

10.55

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. CYBERSOURCE**

Mailing Address PO BOX 8999

City SAN FRANCISCO      State CA      Zip Code 94128

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 03 / 2014
**Transaction ID : SB21B.14639**

Amount of Each Disbursement this Period

72.27

Full Name (Last, First, Middle Initial)

**C. CYBERSOURCE**

Mailing Address PO BOX 8999

City SAN FRANCISCO      State CA      Zip Code 94128

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2014
**Transaction ID : SB21B.14646**

Amount of Each Disbursement this Period

0.73

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF IOWA**

## A. CYBERSOURCE

Transaction ID : SB21B.14641

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

## B. CYBERSOURCE

Transaction ID : SB21B.14644

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. CYBERSOURCE

The image shows three 16-bit registers. The first register has bits 15-14 set to 'M' and contains the value 06. The second register has bits 15-14 set to 'D' and contains the value 11. The third register has bits 15-12 set to 'Y' and contains the value 2014.

Transaction ID : SB21B.14645

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

1.13

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 49

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

## **A. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
 SAN FRANCISCO CA 94128

Purpose of Disbursement  
 MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SB21B.14649**

Amount of Each Disbursement this Period

3.64

Full Name (Last, First, Middle Initial)

## **B. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
 SAN FRANCISCO CA 94128

Purpose of Disbursement  
 MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SB21B.14640**

Amount of Each Disbursement this Period

0.33

Full Name (Last, First, Middle Initial)

## **C. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
 SAN FRANCISCO CA 94128

Purpose of Disbursement  
 MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : SB21B.14650**

Amount of Each Disbursement this Period

9.46

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

13.43

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
SAN FRANCISCO CA 94128
Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 19 2014
**Transaction ID : SB21B.14647**

Amount of Each Disbursement this Period

1.10

Full Name (Last, First, Middle Initial)

**B. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
SAN FRANCISCO CA 94128
Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 22 2014
**Transaction ID : SB21B.14642**

Amount of Each Disbursement this Period

0.22

Full Name (Last, First, Middle Initial)

**C. CYBERSOURCE**

Mailing Address PO BOX 8999

City State Zip Code  
SAN FRANCISCO CA 94128
Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 25 2014
**Transaction ID : SB21B.14651**

Amount of Each Disbursement this Period

36.40

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37.72

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF IOWA

### A. CYBERSOURCE

Mailing Address PO BOX 8999

City	State	Zip Code
SAN FRANCISCO	CA	94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.14643

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	0.36
25-34	0.25
35-44	0.15
45-54	0.10
55-64	0.08
65-74	0.05
75-84	0.03
85+	0.02

## B. CYBERSOURCE

Mailing Address PO BOX 8999

City	State	Zip Code
SAN FRANCISCO	CA	94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.14648

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	1.82
25-34	
35-44	
45-54	
55-64	
65-74	
75-84	
85+	

### C. DES MOINES A TO Z PARTY

Mailing Address 1121 ARMY POST RD

City	State	Zip Code
DES MOINES	IA	50315

Purpose of Disbursement	CHASE CC PAYMENT: EQUIPMENT RENTAL
-------------------------	------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.14652

Amount of Each Disbursement this Period

1110.92

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF IOWA

#### A. EXCLUSIVE CHARTER SERVICE

Date of Disbursement

Transaction ID : SB21B.14654

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

5166.00

**[MEMO ITEM]**

## B. FACEBOOK

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.14655

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

424.53

**[MEMO ITEM]**

### C. JOHN FERLAND

Date of Disbursement

Transaction ID : SB21B.14671

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

129.36

129.36



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. HONEYBADGER BBQ**

Mailing Address

City WINDSOR HEIGHTS      State IA      Zip Code 50324

Purpose of Disbursement  
CATERING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06      20      2014
**Transaction ID : SB21B.14658**

Amount of Each Disbursement this Period

4362.00

Full Name (Last, First, Middle Initial)

**B. HY VEE**

Mailing Address 7101 UNIVERSITY AVE

City WINDSOR HEIGHTS      State IA      Zip Code 50324

Purpose of Disbursement  
BANKERS TRUST CC PAYMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      18      2014
**Transaction ID : SB21B.14685**

Amount of Each Disbursement this Period

66.42

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. HY VEE**

Mailing Address 7101 UNIVERSITY AVE

City WINDSOR HEIGHTS      State IA      Zip Code 50324

Purpose of Disbursement  
BANKERS TRUST CC PAYMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      30      2014
**Transaction ID : SB21B.14684**

Amount of Each Disbursement this Period

16.94

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4362.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW      State CA      Zip Code 94043

Purpose of Disbursement  
CHASE CC PAYMENT: SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 10 / 2014
**Transaction ID : SB21B.14659**

Amount of Each Disbursement this Period

429.95

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. IOWA EVENTS CENTER**

Mailing Address 730 THIRD ST

City DES MOINES      State IA      Zip Code 50309

Purpose of Disbursement  
CHASE CC PAYMENT: FACILITY RENTAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 12 / 2014
**Transaction ID : SB21B.14660**

Amount of Each Disbursement this Period

1471.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. JIMMY JOHN'S**

Mailing Address 422 E LOCUST ST

City DES MOINES      State IA      Zip Code 50309

Purpose of Disbursement  
CHASE CC PAYMENT: TRAVEL: FOOD

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 12 / 2014
**Transaction ID : SB21B.14661**

Amount of Each Disbursement this Period

53.50

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. GOPAL KRISHNA**

Mailing Address 3901 STONEBRIDGE ROAD

City WEST DES MOINES      State IA      Zip Code 50265

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2014
**Transaction ID : SB21B.14670**

Amount of Each Disbursement this Period

228.60

Full Name (Last, First, Middle Initial)

**B. OFFICE MAX**

Mailing Address 2900 UNIVERSITY AVENUE

City WEST DES MOINES      State IA      Zip Code 50265

Purpose of Disbursement  
BANKERS TRUST CC PAYMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014
**Transaction ID : SB21B.14686**

Amount of Each Disbursement this Period

73.10

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. STEVE SCHEFFLER**

Mailing Address 5112 TAMARA LN

City WEST DES MOINES      State IA      Zip Code 50265

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2014
**Transaction ID : SB21B.14673**

Amount of Each Disbursement this Period

750.27

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

978.87



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 49

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. SKIP'S**

Mailing Address 4000 FLEUR DR

City DES MOINES      State IA      Zip Code 50321

Purpose of Disbursement  
CHASE CC PAYMENT: TRAVEL: FOOD

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 05 / 2014
**Transaction ID : SB21B.14662**

Amount of Each Disbursement this Period

30.44

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. WELLS FARGO BANK, N.A.**

Mailing Address 420 MONTGOMERY STREET

City SAN FRANCISCO      State CA      Zip Code 94104

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 11 / 2014
**Transaction ID : SB21B.14663**

Amount of Each Disbursement this Period

51.40

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO BANK, N.A.**

Mailing Address 420 MONTGOMERY STREET

City SAN FRANCISCO      State CA      Zip Code 94104

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
06 / 11 / 2014
**Transaction ID : SB21B.14664**

Amount of Each Disbursement this Period

995.43

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1046.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 49

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

Full Name (Last, First, Middle Initial)

**A. WYNDHAM RIVERFRONT HOTEL**

Mailing Address 701 CONVENTION CENTER BLVD

City	State	Zip Code
NEW ORLEANS	LA	70130

Purpose of Disbursement  
CHASE CC PAYMENT: TRAVEL: LODGING

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

**Transaction ID : SB21B.14665**

Amount of Each Disbursement this Period

123.17
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**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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48013.71
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	21b	<b>X</b>	22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF IOWA

**A. REPUBLICAN PARTY OF IOWA**

Date of Disbursement

Transaction ID : SB22.14229

Category/  
Type

Amount of Each Disbursement this Period

17173.14

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name


Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

17173.14

**TOTAL** This Period (last page this line number only).....

17173.14

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 31 OF 49

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 REPUBLICAN PARTY OF IOWA

NAME OF ACCOUNT  
 REPUBLICAN PARTY OF IOWA

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

TOTAL AMOUNT TRANSFERRED

1500.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1500.00

Transaction ID : H3.14230

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

1500.00

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

1500.00

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>MEDIACOM CABLE</b>		<b>Transaction ID : H4.14608</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 MEDIACOM WAY					
City MEDIACOM PARK	State NY	Zip Code 10918			
Purpose of Disbursement: BANKERS TRUST CC PAYMENT: BROADBAND SERVICES				Allocated Activity or Event Year-To-Date 229665.58	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.39			125.60		158.99

<b>B. Full Name (Last, First, Middle Initial)</b> <b>PER MAR SECURITY</b>		<b>Transaction ID : H4.14609</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 720 E 2ND STREET					
City DES MOINES	State IA	Zip Code 50309			
Purpose of Disbursement: BANKERS TRUST CC PAYMENT: SECURITY SERVICES				Allocated Activity or Event Year-To-Date 251501.04	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.50			43.26		54.76

<b>C. Full Name (Last, First, Middle Initial)</b> <b>QWEST COMMUNICATIONS</b>		<b>Transaction ID : H4.14610</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1801 CALIFORNIA ST					
City DENVER	State CO	Zip Code 80202			
Purpose of Disbursement: BANKERS TRUST CC PAYMENT: COMMUNICATIONS CONSULTING				Allocated Activity or Event Year-To-Date 251695.39	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.81			153.54		194.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>IOWA EVENTS CENTER</b>		<b>Transaction ID : H4.14619</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 730 THIRD ST					
City DES MOINES	State IA	Zip Code 50309			
Purpose of Disbursement: CHASE CC PAYMENT: FACILITY RENTAL				Allocated Activity or Event Year-To-Date 270695.39	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date MM / DD / YYYY 05 / 31 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3990.00			15010.00		19000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>RED CURVE SOLUTIONS</b>		<b>Transaction ID : H4.14606</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 500 CUMMINGS CENTER SUITE 4400					
City BEVERLY	State MA	Zip Code 01915			
Purpose of Disbursement: COMPLIANCE CONSULTING				Allocated Activity or Event Year-To-Date 273523.39	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
593.88			2234.12		2828.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>THE DANA COMPANY</b>		<b>Transaction ID : H4.14611</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12345 UNIVERSITY					
City DES MOINES	State IA	Zip Code 50325-8245			
Purpose of Disbursement: INSURANCE				Allocated Activity or Event Year-To-Date 273898.24	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 04 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.72			296.13		374.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
672.60		2530.25		3202.85

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>SARAH BROOKS</b>		<b>Transaction ID : H4.14667</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2811 E 14TH STREET BOX 31B				Allocated Activity or Event Year-To-Date 274398.24	
City DES MOINES	State IA	Zip Code 50316		Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: ADMINISTRATIVE CONSULTING		<input type="text"/>			
Activity or Event Identifier: <b>Administrative</b>		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="105.00"/>			<input type="text" value="395.00"/>		<input type="text" value="500.00"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14571</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202				Allocated Activity or Event Year-To-Date 306912.92	
City WEST DES MOINES	State IA	Zip Code 50266		Date <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: SEE BELOW: PAYROLL: <25% FED		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6828.08"/>			<input type="text" value="25686.60"/>		<input type="text" value="32514.68"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>STEVEN BIERFELDT</b>		<b>Transaction ID : H4.14572</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2400 HICKMAN ROAD #67				Allocated Activity or Event Year-To-Date 322196.40	
City DES MOINES	State IA	Zip Code 50310		Date <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3209.53"/>			<input type="text" value="12073.95"/>		<input type="text" value="15283.48"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6933.08"/>		<input type="text" value="26081.60"/>		<input type="text" value="33014.68"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 35 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>JOHN FERLAND</b>		<b>Transaction ID : H4.14573</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4902 UNIVERSITY AVE APT 205					
City DES MOINES	State IA	Zip Code 50311			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 324356.76	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.68			1706.68		2160.36

<b>B. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14574</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202					
City WEST DES MOINES	State IA	Zip Code 50266			
Purpose of Disbursement: ITEMIZE: PAYROLL FEE: <25% FED				Allocated Activity or Event Year-To-Date 324417.59	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.77			48.06		60.83

<b>C. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14575</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202					
City WEST DES MOINES	State IA	Zip Code 50266			
Purpose of Disbursement: ITEMIZE: PAYROLL/HSA: <25% FED				Allocated Activity or Event Year-To-Date 324627.59	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10			165.90		210.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 36 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>UNITED STATES TREASURY</b>			<b>Transaction ID : H4.14576</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address INTERNAL REVENUE SERVICE CENTER								
City KANSAS CITY		State MO		Zip Code 64999				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 333263.75		
Activity or Event Identifier: <b>Administrative</b>						Date <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
1813.59						=		
			6822.57			TOTAL AMOUNT		
						8636.16		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TREASURER, STATE OF IOWA</b>			<b>Transaction ID : H4.14577</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address HOOVER OFFICE BUILDING								
City DES MOINES		State IA		Zip Code 50319				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 334908.73		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
345.45						=		
			1299.53			TOTAL AMOUNT		
						1644.98		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>GOPAL KRISHNA</b>			<b>Transaction ID : H4.14578</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3901 STONEBRIDGE ROAD								
City WEST DES MOINES		State IA		Zip Code 50265				
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED						Allocated Activity or Event Year-To-Date 335325.40		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
87.50						=		
			329.17			TOTAL AMOUNT		
						416.67		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 37 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ANDREW SELDEN</b>		<b>Transaction ID : H4.14579</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 686 63RD ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City DES MOINES	State IA	Zip Code 50312		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 336597.40	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 06 / 05 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.12			1004.88		1272.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>DANNY CARROLL</b>		<b>Transaction ID : H4.14580</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 169 - 410TH AVENUE				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City GRINNELL	State IA	Zip Code 50112-0000		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 338055.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 06 / 05 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.25			1152.08		1458.33

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ERIC T BAKER</b>		<b>Transaction ID : H4.14581</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3519 UNIVERSITY AVENUE APT 404				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City DES MOINES	State IA	Zip Code 50311		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 338467.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 06 / 05 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.37			324.92		411.29

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 38 OF 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ANDREW G SPYROW</b>		<b>Transaction ID : H4.14582</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3134 LINDSEY COURT					
City BETTENDORF	State IA	Zip Code 52722			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 338878.31	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
86.37			324.92		411.29

<b>B. Full Name (Last, First, Middle Initial)</b> <b>ALEXANDER S LATCHAM</b>		<b>Transaction ID : H4.14583</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7260 SUNRISE BLVD					
City WINDSOR HEIGHTS	State IA	Zip Code 50324			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 339427.60	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
115.35			433.94		549.29

<b>C. Full Name (Last, First, Middle Initial)</b> <b>TIMES-REPUBLICAN</b>		<b>Transaction ID : H4.14612</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 1300 135 W MAIN ST					
City MARSHALLTOWN	State IA	Zip Code 50158			
Purpose of Disbursement: CHASE CC PAYMENT: PRINTING & DESIGN SERVICES				Allocated Activity or Event Year-To-Date 340885.09	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
306.07			1151.42		1457.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 39 OF 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>IOWA EVENTS CENTER</b>		<b>Transaction ID : H4.14620</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 730 THIRD ST					
City DES MOINES	State IA	Zip Code 50309			
Purpose of Disbursement: CHASE CC PAYMENT: FACILITY RENTAL				Allocated Activity or Event Year-To-Date 344231.27	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
702.70			2643.48		3346.18

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TIMES-REPUBLICAN</b>		<b>Transaction ID : H4.14613</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 1300 135 W MAIN ST					
City MARSHALLTOWN	State IA	Zip Code 50158			
Purpose of Disbursement: CHASE CC PAYMENT: PRINTING & DESIGN SERVICES				Allocated Activity or Event Year-To-Date 344501.59	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
56.77			213.55		270.32

<b>C. Full Name (Last, First, Middle Initial)</b> <b>CHASE CARD SERVICES</b>		<b>Transaction ID : H4.14614</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 93014					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: CREDIT CARD PAYMENT: SEE MEMO ENTRIES				Allocated Activity or Event Year-To-Date 345959.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 06 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
306.07			1151.42		1457.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.07		1151.42		1457.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 40 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>XEROX CORPORATION</b>		<b>Transaction ID : H4.14605</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. BOX 802567					
City CHICAGO	State IL	Zip Code 60680-2567			
Purpose of Disbursement: EQUIPMENT RENTAL				Allocated Activity or Event Year-To-Date 346698.75	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date MM / DD / YYYY 06 / 11 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
155.33			584.34		739.67

<b>B. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14596</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202					
City WEST DES MOINES	State IA	Zip Code 50266			
Purpose of Disbursement: SEE BELOW: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 363423.68	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 13 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3512.24			13212.69		16724.93

<b>C. Full Name (Last, First, Middle Initial)</b> <b>STEVEN BIERFELDT</b>		<b>Transaction ID : H4.14597</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2400 HICKMAN ROAD #67					
City DES MOINES	State IA	Zip Code 50310			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 374718.96	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 13 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2372.01			8923.27		11295.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3667.57		13797.03		17464.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 41 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>			<b>Transaction ID : H4.14598</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1454 30TH STREET SUITE 202								
City WEST DES MOINES		State IA		Zip Code 50266				
Purpose of Disbursement: ITEMIZE: PAYROLL FEE: <25% FED						Allocated Activity or Event Year-To-Date 374758.16		
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]								
FEDERAL SHARE			+ NONFEDERAL SHARE			= TOTAL AMOUNT		
8.23			30.97			39.20		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>UNITED STATES TREASURY</b>			<b>Transaction ID : H4.14599</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address INTERNAL REVENUE SERVICE CENTER								
City KANSAS CITY		State MO		Zip Code 64999				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 379286.14		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+ NONFEDERAL SHARE			= TOTAL AMOUNT		
950.88			3577.10			4527.98		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>TREASURER, STATE OF IOWA</b>			<b>Transaction ID : H4.14600</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address HOOVER OFFICE BUILDING								
City DES MOINES		State IA		Zip Code 50319				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 380148.61		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+ NONFEDERAL SHARE			= TOTAL AMOUNT		
181.12			681.35			862.47		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CHASE CARD SERVICES</b>		<b>Transaction ID : H4.14615</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 93014					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: CREDIT CARD PAYMENT: SEE MEMO ENTRIES				Allocated Activity or Event Year-To-Date 380418.93	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date MM / DD / YYYY 06 / 13 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
56.77			213.55		270.32

<b>B. Full Name (Last, First, Middle Initial)</b> <b>DELTA DENTAL OF IOWA</b>		<b>Transaction ID : H4.14602</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 5044					
City DES MOINES	State IA	Zip Code 50305-5044			
Purpose of Disbursement: INSURANCE				Allocated Activity or Event Year-To-Date 380642.49	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 16 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
186.30			37.26		223.56

<b>C. Full Name (Last, First, Middle Initial)</b> <b>JOEY BALDWIN</b>		<b>Transaction ID : H4.14779</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 555 SE LAUREL ST					
City WAUKEE	State IA	Zip Code 50263			
Purpose of Disbursement: MILEAGE				Allocated Activity or Event Year-To-Date 380942.49	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 06 / 16 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
63.00			237.00		300.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.07		487.81		793.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 43 OF 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>COVENTRY HEALTH CARE OF IOWA</b>			<b>Transaction ID : H4.14601</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 6481								
City CAROL STREAM	State IL	Zip Code 60197-6481				Allocated Activity or Event Year-To-Date 381698.42		
Purpose of Disbursement: INSURANCE						Date MM / DD / YYYY 06 / 19 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
509.97						=		
			245.96			TOTAL AMOUNT		
						755.93		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>MIDAMERICAN ENERGY</b>			<b>Transaction ID : H4.14603</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 8020								
City DAVENPORT	State IA	Zip Code 52808				Allocated Activity or Event Year-To-Date 382031.12		
Purpose of Disbursement: UTILITIES						Date MM / DD / YYYY 06 / 19 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
69.87						=		
			262.83			TOTAL AMOUNT		
						332.70		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>WINDSTREAM/PAETEC</b>			<b>Transaction ID : H4.14604</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 1283								
City BUFFALO	State NY	Zip Code 14240-1283				Allocated Activity or Event Year-To-Date 382607.75		
Purpose of Disbursement: TELEPHONE SERVICES						Date MM / DD / YYYY 06 / 19 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
121.09						=		
			455.54			TOTAL AMOUNT		
						576.63		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
700.93		964.33		1665.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 44 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>BANKERS TRUST CC FEDERAL</b>			<b>Transaction ID : H4.14618</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 1991								
City DES MOINES		State IA		Zip Code 50305				
Purpose of Disbursement: CREDIT CARD PAYMENT: SEE MEMO ENTRIES						Allocated Activity or Event Year-To-Date 383015.85		
Activity or Event Identifier: <b>Administrative</b>						Date <input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="85.70"/>						<input type="text" value="322.40"/>		
			=			TOTAL AMOUNT		
<input type="text" value="85.70"/>						<input type="text" value="408.10"/>		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>			<b>Transaction ID : H4.14584</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1454 30TH STREET SUITE 202								
City WEST DES MOINES		State IA		Zip Code 50266				
Purpose of Disbursement: SEE BELOW: PAYROLL: <25% FED						Allocated Activity or Event Year-To-Date 401937.52		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="3973.55"/>						<input type="text" value="14948.12"/>		
			=			TOTAL AMOUNT		
<input type="text" value="3973.55"/>						<input type="text" value="18921.67"/>		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>STEVEN BIERFELDT</b>			<b>Transaction ID : H4.14585</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2400 HICKMAN ROAD #67								
City DES MOINES		State IA		Zip Code 50310				
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED						Allocated Activity or Event Year-To-Date 404768.96		
Activity or Event Identifier: Administrative						Date <input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>		
[MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="594.60"/>						<input type="text" value="2236.84"/>		
			=			TOTAL AMOUNT		
<input type="text" value="594.60"/>						<input type="text" value="2831.44"/>		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
<input type="text" value="4059.25"/>						<input type="text" value="15270.52"/>						<input type="text" value="19329.77"/>		

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE						NONFEDERAL SHARE						TOTAL AMOUNT		
<input type="text"/>						<input type="text"/>						<input type="text"/>		

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 45 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>JOHN FERLAND</b>		<b>Transaction ID : H4.14586</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4902 UNIVERSITY AVE APT 205					
City DES MOINES	State IA	Zip Code 50311			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 409815.75	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1059.83			3986.96		5046.79

<b>B. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14587</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202					
City WEST DES MOINES	State IA	Zip Code 50266			
Purpose of Disbursement: ITEMIZE: PAYROLL FEE: <25% FED				Allocated Activity or Event Year-To-Date 409860.31	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.36			35.20		44.56

<b>C. Full Name (Last, First, Middle Initial)</b> <b>KABEL BUSINESS SERVICES</b>		<b>Transaction ID : H4.14588</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1454 30TH STREET SUITE 202					
City WEST DES MOINES	State IA	Zip Code 50266			
Purpose of Disbursement: ITEMIZE: PAYROLL/HSA: <25% FED				Allocated Activity or Event Year-To-Date 410070.31	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10			165.90		210.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 46 OF 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>UNITED STATES TREASURY</b>			<b>Transaction ID : H4.14589</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address INTERNAL REVENUE SERVICE CENTER								
City KANSAS CITY		State MO		Zip Code 64999				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 414701.62		
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
972.58						3658.73		
			=			TOTAL AMOUNT		
						4631.31		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TREASURER, STATE OF IOWA</b>			<b>Transaction ID : H4.14590</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address HOOVER OFFICE BUILDING								
City DES MOINES		State IA		Zip Code 50319				
Purpose of Disbursement: ITEMIZE: PAYROLL TAXES: <25% FED						Allocated Activity or Event Year-To-Date 415583.78		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
185.25						696.91		
			=			TOTAL AMOUNT		
						882.16		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>GOPAL KRISHNA</b>			<b>Transaction ID : H4.14591</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3901 STONEBRIDGE ROAD								
City WEST DES MOINES		State IA		Zip Code 50265				
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED						Allocated Activity or Event Year-To-Date 416000.45		
Activity or Event Identifier: Administrative [MEMO ITEM]								
FEDERAL SHARE			+			NONFEDERAL SHARE		
87.50						329.17		
			=			TOTAL AMOUNT		
						416.67		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 47 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>DANNY CARROLL</b>		<b>Transaction ID : H4.14592</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 169 - 410TH AVENUE					
City GRINNELL	State IA	Zip Code 50112-0000			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 417458.78	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
306.25			1152.08		1458.33

<b>B. Full Name (Last, First, Middle Initial)</b> <b>ERIC T BAKER</b>		<b>Transaction ID : H4.14593</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3519 UNIVERSITY AVENUE APT 404					
City DES MOINES	State IA	Zip Code 50311			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 418455.99	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.41			787.80		997.21

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ANDREW G SPYROW</b>		<b>Transaction ID : H4.14594</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3134 LINDSEY COURT					
City BETTENDORF	State IA	Zip Code 52722			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 419453.20	
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.41			787.80		997.21

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 OF 49

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ALEXANDER S LATCHAM</b>		<b>Transaction ID : H4.14595</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7260 SUNRISE BLVD					
City WINDSOR HEIGHTS	State IA	Zip Code 50324			
Purpose of Disbursement: ITEMIZE: PAYROLL: <25% FED				Allocated Activity or Event Year-To-Date 420859.19	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		Date 06 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
295.26			1110.73		1405.99

<b>B. Full Name (Last, First, Middle Initial)</b> <b>RED CURVE SOLUTIONS</b>		<b>Transaction ID : H4.14607</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 500 CUMMINGS CENTER SUITE 4400					
City BEVERLY	State MA	Zip Code 01915			
Purpose of Disbursement: COMPLIANCE CONSULTING				Allocated Activity or Event Year-To-Date 423703.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 06 / 26 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
597.32			2247.05		2844.37

<b>C. Full Name (Last, First, Middle Initial)</b> <b>GOVERNOR BRANSTAD COMMITTEE</b>		<b>Transaction ID : H4.14616</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2775 86TH ST.					
City URBANDALE	State IA	Zip Code 50322			
Purpose of Disbursement: RENT & UTILITIES				Allocated Activity or Event Year-To-Date 425703.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 06 / 26 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00			1580.00		2000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1017.32		3827.05		4844.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 OF 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF IOWA**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>OTTUMWA COMMUNITY SCHOOLS</b>			<b>Transaction ID : H4.14617</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address ATTN: ACCOUNTS RECEIVABLE 422 MCCARROLL DR.								
City OTTUMA		State IA		Zip Code 52501				
Purpose of Disbursement: FACILITY RENTAL				Category/ Type		Allocated Activity or Event Year-To-Date 426965.56		
Activity or Event Identifier: Administrative						Date 06 / 26 / 2014		
FEDERAL SHARE			+			NONFEDERAL SHARE		
265.02						996.98		
			=			TOTAL AMOUNT		
						1262.00		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>MAHAFFEY LAW OFFICE</b>			<b>Transaction ID : H4.14666</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 107 S 4TH ST PO BOX 850								
City MONTEZUMA		State IA		Zip Code 50171				
Purpose of Disbursement: LEGAL CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 427165.56		
Activity or Event Identifier: Administrative						Date 06 / 26 / 2014		
FEDERAL SHARE			+			NONFEDERAL SHARE		
42.00						158.00		
			=			TOTAL AMOUNT		
						200.00		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>STEPHANIE TURNER</b>			<b>Transaction ID : H4.14668</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 701 N C STREET UNIT 4001								
City INDIANOLA		State IA		Zip Code 50125				
Purpose of Disbursement: ADMINISTRATIVE CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 427465.56		
Activity or Event Identifier: Administrative						Date 06 / 26 / 2014		
FEDERAL SHARE			+			NONFEDERAL SHARE		
63.00						237.00		
			=			TOTAL AMOUNT		
						300.00		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.02		1391.98		1762.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
18032.91	65501.99	83534.90